

Insurance Verification Worksheet

Branz Nutrition

FOR THE WHOLE FAMILY

Insurance the "fun" stuff, said no one ever!

We attempt to make this "easy" by using the verification form to assist you in gathering essential information from your insurance provider regarding your nutrition counseling benefits.

If you opt to utilize your health insurance policy to subsidize a portion of your nutrition therapy expenses, it's crucial to comprehend your coverage details, including co-pays and deductibles.

We are affiliated with major insurance networks such as Aetna, BCBS, Cigna, and United Healthcare

How to Check Your Benefits:

- Grab your insurance card and call the number on the back requesting a benefit check.
- Please gather all the following information and list the responses from your insurance provider.
- Ensuring payment for services remains ultimately YOUR responsibility.
- It will take Branz Nutrition approximately 4-6 weeks to obtain the initial explanation of benefits from your insurance company and determine your financial responsibility.
- You should receive an Estimate of Benefits notification by mail or through your insurance portal containing this information from your insurance company.
- If you have a copay or deductible, Branz Nutrition will charge the card on file once the information is available on the insurance portal.
- Last but not least, send a copy of your insurance card (front and back) to
billing@branznutritioncounseling.com

Just a friendly reminder: if you fail to verify your benefits and discover that nutrition counseling isn't covered under your insurance plan, you will be liable for paying 100% of the self-pay rates according to our billing policy.

What Insurance Will NOT Cover:

- \$110 will be charged for a late cancellation or no-show within 48 hours
 - No exceptions apply - insurance coverage does not extend to this charge.
- For sessions involving parents of adolescent patients, please be aware that if the child is not

present during our session, we are unable to bill insurance for medical nutrition therapy for parent-only sessions.

- These would be considered private pay sessions for the parents since your child is our patient.
- Should you request a supported meal and snack session with your dietitian, insurance coverage may be possible pending plan approval for the actual session, the meal portion is not covered by insurance.
 - A \$35 fee will be applied to cover our expenses for meal/snack sessions.
- Certain services may not be deemed medically necessary by your health plan.
 - If you have questions for your treatment team outside of the session time, we recommend saving these for the next session.
 - We reserve the right to charge for treatment planning emails and phone calls outside of sessions, which begin at \$30 for every 15 minutes.
 - While they may be beneficial to you, dietitian services for these are not reimbursable according to the terms of your insurance plan. The responsibility for these non-reimbursable services lies with the patient.

If there is a co-pay, deductible or sessions are not covered by insurance, I understand BNC will charge the card on file upon notification from your insurance.

Yes, I understand and it is my responsibility to check benefits.

Call the Member Services Number on Your Insurance Card.

Ask to check "Benefits and Coverage."

Please know that your dietitian practices within a Health At Every Size framework. The number on the scale does not dictate health. Insurance does not practice this framework and often will give nutrition coverage to individuals with a higher BMI. For this reason, we want to do what we can to get your sessions covered so we can focus on you, not your weight. If you feel comfortable proceeding with an "ob*sity" diagnosis, ask your insurer below. Feel free to ask your dietitian more about this in the session.

Do I have benefits for nutrition counseling, CPT codes 97802 and 97803?

Do I have nutrition counseling benefits covered under the preventative care portion of my plan (ID 10 code Z71.3 or E66*)

Do you cover eating disorder codes (F50.9)?

Is a doctor's referral required?

Is there a limit on the number of visits covered?

Are telehealth (virtual) visits covered?

Do I have a deductible to meet before insurance pays?

Do I have a co-pay or co-insurance?

If your health insurance plan is not listed above, you can ask if Branz Nutrition LLC (National Provider Identification #:1225785561) is a covered group under my plan? If not a covered group, what are my out-of-network nutrition counseling benefits.

What is the name of the representative I spoke with, date, and reference number for this call?